

Fill in this information to identify the case:

Debtor name Colinear Machine & Design Holdings LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) 25-10813 (VFP)

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule E/F*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on February 25, 2025

X /s/ Mark Heston

Signature of individual signing on behalf of debtor

Mark Heston

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Colinear Machine & Design Holdings LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEW JERSEY**

Case number (if known) **25-10813 (VFP)**

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Official Form 206Sum Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: **Summary of Assets**

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 5,920,097.75
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 5,920,097.75

Part 2: **Summary of Liabilities**

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **3,216,046.36**

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 0.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 2,612,196.73

4. **Total liabilities** Lines 2 + 3a + 3b

\$ **5,828,243.09**

Fill in this information to identify the case:

Debtor name **Colinear Machine & Design Holdings LLC**United States Bankruptcy Court for the: **DISTRICT OF NEW JERSEY**Case number (if known) **25-10813 (VFP)**

Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

 No. Go to Part 2. Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.2	Priority creditor's name and mailing address New Jersey Dept. of Labor Workforce Dev. Div. of Unemployment & Disability Ins. Bankruptcy Unit PO Box 951 Trenton, NJ 08611-0951	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)	
2.3	Priority creditor's name and mailing address New Jersey Division of Taxation Compliance/Enforcement - Bankruptcy Unit 3 John Fitch Way, 5th Fl. Trenton, NJ 08695-0245	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00	\$0.00
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.4	Priority creditor's name and mailing address NJ Dept. of Labor - Div. Employer Accts. 1 John Fitch Plaza PO Box 379 Trenton, NJ 08611-0379	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00	\$0.00
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address A&M Industrial Inc. 37 West Cherry Street PO Box 1044 Rahway, NJ 07065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____	\$89,568.91
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.2	Nonpriority creditor's name and mailing address Admiral Metals 11 Forbes Road Woburn, MA 01801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____	\$2,425.90
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.3	Nonpriority creditor's name and mailing address Advanced Coating Techniques 313 Wyandanch Avenue North Babylon, NY 11704	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____	\$7,680.50
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)
3.4	Nonpriority creditor's name and mailing address Aero Engineering 206 Thiebes Road Labadie, MO 63005 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,875.00
3.5	Nonpriority creditor's name and mailing address Aerospace Testing Lab Inc. 32 S. Satellite Road South Windsor, CT 06074 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,126.50
3.6	Nonpriority creditor's name and mailing address Aerotech Processing 57 Wood Street Paterson, NJ 07524 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,339.02
3.7	Nonpriority creditor's name and mailing address All World Machinery Supply 616 All World Way Roscoe, IL 61073 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,453.45
3.8	Nonpriority creditor's name and mailing address Allendale Machinery Systems 16 Park Way Saddle River, NJ 07458 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,975.90
3.9	Nonpriority creditor's name and mailing address Alloy Metals Company 3400 E. 69th Street Long Beach, CA 90805 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,390.00
3.10	Nonpriority creditor's name and mailing address Alro Steel Corporation 3100 E. High Street Jackson, MI 49203 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,905.84

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)
3.11	Nonpriority creditor's name and mailing address Aluminum Precision Products Inc. 3333 W. Warner Avenue Santa Ana, CA 92704 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,637.87
3.12	Nonpriority creditor's name and mailing address American Express PO Box 981535 El Paso, TX 79998 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit card Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$46,236.54
3.13	Nonpriority creditor's name and mailing address American Precision Hydraulics 5601 Research Drive Huntington Beach, CA 92649 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,385.00
3.14	Nonpriority creditor's name and mailing address Anaplex Metal Processing 15547 Garfield Avenue Paramount, CA 90723 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$593.75
3.15	Nonpriority creditor's name and mailing address Aviva Metals Inc. 2929 West 12th Street Houston, TX 77008 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,866.00
3.16	Nonpriority creditor's name and mailing address Basic Benefits PO Box 88137 Milwaukee, WI 53288-0001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$591.08
3.17	Nonpriority creditor's name and mailing address Beck, David 2 Emery Avenue Randolph, NJ 07869 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,052.78

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)
3.18	Nonpriority creditor's name and mailing address Bruner Heating 135 Monroe Trail Hopatcong, NJ 07843 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,493.04
3.19	Nonpriority creditor's name and mailing address Burton Industries Inc. 243 Wyandanch Avenue West Babylon, NY 11704 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,399.77
3.20	Nonpriority creditor's name and mailing address Busy B's Landscaping LLC 127 Overlook Road Newton, NJ 07860 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,881.75
3.21	Nonpriority creditor's name and mailing address C3 Integrated Solutions 3033 Wilson B.vd., Ste. 700 Arlington, VA 22201 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$512.59
3.22	Nonpriority creditor's name and mailing address Cametoid Technologies 45 S. Satellite Road South Windsor, CT 06074 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,103.60
3.23	Nonpriority creditor's name and mailing address Cintas Corporation 410 Clermont Terrace Union, NJ 07083 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,676.84
3.24	Nonpriority creditor's name and mailing address Comairco 3910 Park Avenue, #4 Edison, NJ 08820 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,287.25

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)
3.25	<p>Nonpriority creditor's name and mailing address Concise Manufacturing Inc. 630 Corporate Circle Salisbury, NC 28147</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$13,330.46
3.26	<p>Nonpriority creditor's name and mailing address Continental Forge 412 East El Segundo Blvd. Compton, CA 90222</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,361.80
3.27	<p>Nonpriority creditor's name and mailing address Cool Tower LLC 253 Oak Ridge Road Oak Ridge, NJ 07438</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Rent \$27,533.72 Taxes \$8,601.20</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$36,134.92
3.28	<p>Nonpriority creditor's name and mailing address Creative Safety Supply 8030 SW Nimbus Avenue Beaverton, OR 97008</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$636.88
3.29	<p>Nonpriority creditor's name and mailing address Dauson Container corp. 22 Lasinski Road Franklin, NJ 07416</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$135.00
3.30	<p>Nonpriority creditor's name and mailing address Davron, LLC c/o Adams Evans & Ross NC, LLC 3760 Sixes Road, Ste. 126 Conyers, GA 30114</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$10,241.59
3.31	<p>Nonpriority creditor's name and mailing address DigiKey 701 Brooks Ave., S PO Box 677 Thief River Falls, MN 56701-0677</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$24,469.77

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)
3.32	Nonpriority creditor's name and mailing address Domino Amjet, Inc. 1290 Lakeside Drive Gurnee, IL 60031 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,010.85
3.33	Nonpriority creditor's name and mailing address Drilling Dynamics 336 Boston Post Road Milford, CT 06460 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,240.00
3.34	Nonpriority creditor's name and mailing address Element Materials Technology 6840 Lake Abram Drive Middleburg Heights, OH 44130 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,761.25
3.35	Nonpriority creditor's name and mailing address Embee Processing LLC 2158 South Hathaway Street Santa Ana, CA 92705 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$149,027.53
3.36	Nonpriority creditor's name and mailing address Frederick Fox LLC 2405 Quantum Blvd. Boynton Beach, FL 33426 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,750.00
3.37	Nonpriority creditor's name and mailing address Globe Grinding Corp. 1365 Akron Street Copiague, NY 11726 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59,384.00
3.38	Nonpriority creditor's name and mailing address Hadco Metal Trading Co. 120 Spagnoli Road, Ste. 1 Melville, NY 11747 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72,136.77

Debtor	Case number (if known)	
3.39 Nonpriority creditor's name and mailing address Hadco Metal Trading Co. LLC 120 Spagnoli Road, Ste. 1 Melville, NY 11747	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$72,136.77
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.40 Nonpriority creditor's name and mailing address Heston, Mark 18 Benham Way Sparta, NJ 07871	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$11,824.67
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.41 Nonpriority creditor's name and mailing address Hexagon Metrology 250 circuit Drive North Kingstown, RI 02852	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$21,174.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.42 Nonpriority creditor's name and mailing address Hopatcong Rigging 14 Gail Court Sparta, NJ 07871	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,375.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.43 Nonpriority creditor's name and mailing address Hunter Hone Inc. 55B Remington Blvd. Ronkonkoma, NY 11779	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$7,380.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.44 Nonpriority creditor's name and mailing address Jamaica Bearings Co., Inc. 1700 Jericho Turnpike New Hyde Park, NY 11040-4738	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,603.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number <u>4350</u>	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.45 Nonpriority creditor's name and mailing address JCP&L 101 Crawford's Corner Bldg. 1, Ste. 1-511 Holmdel, NJ 07733	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$6,328.18
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Utilities</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Case number (if known)	
3.46	Colinear Machine & Design Holdings LLC Name	25-10813 (VFP)
Nonpriority creditor's name and mailing address KBDickson LLC 9365 SW Buckskin Terrace Beaverton, OR 97008		As of the petition filing date, the claim is: <i>Check all that apply.</i>
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _		Basis for the claim: _
Last 4 digits of account number _		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address KLX Inc. 10000 NW 15th Terrace Miami, FL 33174	As of the petition filing date, the claim is: <i>Check all that apply.</i>
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _		Basis for the claim: _
Last 4 digits of account number _		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Nonpriority creditor's name and mailing address KS&C Industries, LLP 2750 S. Hanley Road Saint Louis, MO 63143	As of the petition filing date, the claim is: <i>Check all that apply.</i>
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _		Basis for the claim: _
Last 4 digits of account number _		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	Nonpriority creditor's name and mailing address Lee Company (The) 2 Pettipaug Road Westbrook, CT 06498	As of the petition filing date, the claim is: <i>Check all that apply.</i>
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _		Basis for the claim: _
Last 4 digits of account number _		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	Nonpriority creditor's name and mailing address Loeffel's Waste Oil Service 43 Layton Lane Sparta, NJ 07871	As of the petition filing date, the claim is: <i>Check all that apply.</i>
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _		Basis for the claim: _
Last 4 digits of account number _		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	Nonpriority creditor's name and mailing address Lumen c/o Frank Frank Goldstein & Nager PC 330 West 38th Street, Ste. 701 New York, NY 10018	As of the petition filing date, the claim is: <i>Check all that apply.</i>
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _		Basis for the claim: _
Last 4 digits of account number _		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	Nonpriority creditor's name and mailing address Magnetic Inspection Laboratory, Inc. 1401 Greenleaf Avenue Elk Grove Village, IL 60007	As of the petition filing date, the claim is: <i>Check all that apply.</i>
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _		Basis for the claim: _
Last 4 digits of account number _		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)
3.53	Nonpriority creditor's name and mailing address McElhone, Patrick 100 W. Houston Street, #6 New York, NY 10012 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104,105.57
3.54	Nonpriority creditor's name and mailing address McMaster Carr 200 New Canton Way Robbinsville Twp., NJ 08691 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,828.45
3.55	Nonpriority creditor's name and mailing address Mercury Broach Co. 2546 Seaman Avenue South El Monte, CA 91733 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,003.25
3.56	Nonpriority creditor's name and mailing address Metal Finishing Co. 1423 S. McClean Blvd. Wichita, KS 67213 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,137.32
3.57	Nonpriority creditor's name and mailing address Metals Eng. & Testing Labs 2040 W. Quail Avenue Phoenix, AZ 85027 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$175.00
3.58	Nonpriority creditor's name and mailing address MSC Industrial Supply Co. 515 Broadhollow Road, Ste. 1000 Melville, NY 11747 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,756.07
3.59	Nonpriority creditor's name and mailing address Nitrex 350 Blue Chip Court Franklin, IN 46131 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,048.00

Debtor	Case number (if known)	
3.60	Colinear Machine & Design Holdings LLC Name	25-10813 (VFP)
Nonpriority creditor's name and mailing address Paracode CNC Solutions 103 Majestic Oaks Drive Broussard, LA 70518		As of the petition filing date, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61	Nonpriority creditor's name and mailing address Pennsylvania Steel Company Inc. 1717 Woodhaven Drive PO Box 40 Bensalem, PA 19020	As of the petition filing date, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Nonpriority creditor's name and mailing address Performance Titanium Group 8400 Miramar Road, Ste. 200-248C San Diego, CA 92126	As of the petition filing date, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address Phoenix Heat Treating 2405 West Mohave Street Phoenix, AZ 85009	As of the petition filing date, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address Planet Networks 4 Park Place Newton, NJ 07860	As of the petition filing date, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Nonpriority creditor's name and mailing address Precision Aircraft Group Inc. 797 North Avenue Vista, CA 92083	As of the petition filing date, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	Nonpriority creditor's name and mailing address R. Poust, Inc. 27 Wilson Drive Sparta, NJ 07871	As of the petition filing date, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Case number (if known)	
Colinear Machine & Design Holdings LLC Name	25-10813 (VFP)	
3.67 Nonpriority creditor's name and mailing address Saad, Ramy 2 Old Farm Lane Old Greenwich, CT 06870	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$104,105.57
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.68 Nonpriority creditor's name and mailing address Safety-Kleen, Inc. 42 Longwater Drive Norwell, MA 02061	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,065.11
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Last 4 digits of account number _____	Basis for the claim: _____	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.69 Nonpriority creditor's name and mailing address Samuel, Son & Co. (USA) Inc. 1700 Ridgely Street Baltimore, MD 21230	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9,197.70
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Last 4 digits of account number _____	Basis for the claim: _____	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.70 Nonpriority creditor's name and mailing address Service Steel Aerospace Corp. 827 Marshall Phelps Road Windsor, CT 06095	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$33,917.90
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Last 4 digits of account number _____	Basis for the claim: _____	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.71 Nonpriority creditor's name and mailing address Seward & Monde 296 State Street North Haven, CT 06473-9987	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$13,685.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Last 4 digits of account number _____	Basis for the claim: _____	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.72 Nonpriority creditor's name and mailing address Sigma Aerospace Metals 147 Industrial Parkway, Ste. 104 Pottstown, PA 19464	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$13,056.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Last 4 digits of account number _____	Basis for the claim: _____	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.73 Nonpriority creditor's name and mailing address Stapleton Group (The) 6825 Silver Pond Heights, Ste. 106 Colorado Springs, CO 80908	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$12,076.22
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Last 4 digits of account number _____	Basis for the claim: _____	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Case number (if known)	
3.74	Colinear Machine & Design Holdings LLC Name	25-10813 (VFP)
Nonpriority creditor's name and mailing address Stuart Mills 25 Stillwater Road Newton, NJ 07860		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75	Nonpriority creditor's name and mailing address Sunbelt Design Holdings LLC 730 Perez Street San Antonio, TX 78207	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.76	Nonpriority creditor's name and mailing address Sunshine Metals 3941 South Norman Wichita, KS 67215	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.77	Nonpriority creditor's name and mailing address Superior Plus Propane 255 Oak Ridge Road Oak Ridge, NJ 07438	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: <u>Utilities</u>
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.78	Nonpriority creditor's name and mailing address Superior Thread Rolling Co. 12801 Wentworth Street Arleta, CA 91331	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	Nonpriority creditor's name and mailing address Swiatkiewicz, Stephen 39 Fifth Avenue, 10AB New York, NY 10003	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.80	Nonpriority creditor's name and mailing address Taft Stettinius & Hollister LLP 425 Walnut Street, Ste. 1800 Cincinnati, OH 45202	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Colinear Machine & Design Holdings LLC	Case number (if known)	25-10813 (VFP)
3.81	Nonpriority creditor's name and mailing address Tecknickrome Aeronautique 12264 Rue April Montreal, QC H1B 5N5 CANADA Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,732.44
3.82	Nonpriority creditor's name and mailing address Titanium Finishing Company PO Box 22 East Greenville, PA 18041 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$961.80
3.83	Nonpriority creditor's name and mailing address Titanium Industries 18 Green Pine Road Rockaway, NJ 07866 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$529.70
3.84	Nonpriority creditor's name and mailing address Tool Krib Supply 787 Passaic Avenue West Caldwell, NJ 07007 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,993.71
3.85	Nonpriority creditor's name and mailing address Tri-Process Co. - Valence 7718 Adams Street Paramount, CA 90723 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,750.00
3.86	Nonpriority creditor's name and mailing address Trimech Solutions 4461 Cox Road, Ste. 302 Glen Allen, VA 23060 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,107.04
3.87	Nonpriority creditor's name and mailing address TUV SUD America Inc. PO Box 22189 New York, NY 10087-2189 Date(s) debt was incurred _____ Last 4 digits of account number <u>1260</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,688.44

Debtor	Case number (if known)	
Colinear Machine & Design Holdings LLC Name	25-10813 (VFP)	
3.88 Nonpriority creditor's name and mailing address TW Metals 27 Englehard Drive Monroe Township, NJ 08831	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$11,252.98
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.89 Nonpriority creditor's name and mailing address Uline 2575 Uline Drive Pleasant Prairie, WI 53158	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,081.26
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.90 Nonpriority creditor's name and mailing address United Service Company 43 Cody Street West Hartford, CT 06110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,685.00
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.91 Nonpriority creditor's name and mailing address Universal Metals Company 1020 Railroad Street Corona, CA 92882	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$974.40
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.92 Nonpriority creditor's name and mailing address UPS 55 Glenlake Parkway, NE Atlanta, GA 30328	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$14,661.54
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.93 Nonpriority creditor's name and mailing address Victoria Aerospace Holdings LLC 7 Wilson Drive Springfield, NJ 07081	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$173,527.39
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.94 Nonpriority creditor's name and mailing address Walsh Pizzi O'Reilly Falanga LLP Attn: Stephen V. Falanga, Esq. Three Gateway Center 100 Mulberry Street, 15th Fl. Newark, NJ 07102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$56,887.36
Date(s) debt was incurred _____	Basis for the claim: <u>Services</u>	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)
3.95	Nonpriority creditor's name and mailing address Wayne Tool & Supply Co., Inc. 279-283 Laurel Avenue PO Box 498 Kearny, NJ 07032 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,357.47
3.96	Nonpriority creditor's name and mailing address Wencor LLC 3577 S. Mountain Vista Parkway Provo, UT 84606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$75,620.00
3.97	Nonpriority creditor's name and mailing address Westfield Electroplating Co. 68 N. Elmstreet Westfield, MA 01085 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,972.00
3.98	Nonpriority creditor's name and mailing address Willrich Precision 80 Broadway Cresskill, NJ 07626 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,173.16
3.99	Nonpriority creditor's name and mailing address Windmill Hill LLC 17 Olmstead Court New Canaan, CT 06840 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,816.63
3.100	Nonpriority creditor's name and mailing address Yarde Metals Inc. 45 Newell Street Southington, CT 06489 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$63,113.03

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Debtor	Colinear Machine & Design Holdings LLC Name	Case number (if known)	25-10813 (VFP)
Name and mailing address		On which line in Part 1 or Part 2 is the related creditor (if any) listed?	
4.1	American Express World Financial Center 200 Vesey Street New York, NY 10285	Line <u>3.12</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.2	New Jersey Attorney General's Office Div. of Law; RJ Hughes Justice Complex 25 Market Street PO Box 112 Trenton, NJ 08625-0112	Line <u>2.3</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.3	New Jersey Attorney General's Office Div. of Law; RJ Hughes Justice Complex 25 Market Street PO Box 112 Trenton, NJ 08625-0112	Line <u>2.2</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.4	New Jersey Attorney General's Office Div. of Law; RJ Hughes Justice Complex 25 Market Street PO Box 112 Trenton, NJ 08625-0112	Line <u>2.4</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.5	United States Attorney Peter Rodino Federal Building 970 Broad Street, Ste. 700 Newark, NJ 07102	Line <u>2.1</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.6	United States Attorney General United States Department of Justice Ben Franklin Station PO Box 683 Washington, DC 20044	Line <u>2.1</u>	—
		<input type="checkbox"/> Not listed. Explain _____	

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1
5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts		
5a.	\$	0.00
5b.	+	\$ 2,612,196.73
5c.	\$	2,612,196.73

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)
McMANIMON, SCOTLAND & BAUMANN, LLC
75 Livingston Avenue, Suite 201
Roseland, NJ 07068
(973) 622-1800
Anthony Sodono, III (asodono@msbnj.com)
Attorneys for Colinear Machine & Design Holdings
LLC, Debtor/Debtor-in-Possession

In Re:
Colinear Machine & Design Holdings LLC,

Debtor.

Case No.: 25-10813 (VFP)

Chapter: 11

Judge: Vincent F. Papalia

AMENDMENT TO SCHEDULE D, E, F, G, H or LIST OF CREDITORS

Please specify the list or schedule(s) to be amended:

Schedule D - Creditors Holding Secured Claims Schedule H - Codebtors

Schedule E - Creditors Holding Unsecured Priority Claims List of Creditors (Matrix)

Schedule F - Creditors Holding Unsecured Claims

Schedule G - Executory Contracts and Unexpired Leases

IMPORTANT: Pursuant to D.N.J. LBR 1007-1, the mailing list must be updated when an amendment to Schedule D, E, F, G, or H is filed. Accordingly, there is a fee to amend any of the above schedules. There is no fee due if the nature of the amendment is to add or change the address of a previously listed creditor.

The list or schedule(s) indicated above, having been previously filed, is amended as follows:
(List name and address of creditors being added, deleted or modified and indicate same; use separate sheet if necessary)

See attached list.

I certify under penalty of perjury that the above information is correct:

Date: February 25, 2025 Debtor's signature: /s/ Mark Heston

* Schedules D, E, F, G or H and the List of Creditors may be amended simultaneously, thereby incurring only one \$31 fee.

ADD

Jamaica Bearings Co., Inc.
1700 Jericho Turnpike
New Hyde Park, NY 11040-4738

TUV SUD America Inc.
PO Box 22189
New York, NY 10087-2189